

**SANTA MARIA LEGAL PROFESSIONALS ASSOCIATION  
2022-2023 DUES STATEMENT**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ home/work/cell

Employer: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Work Telephone Number: \_\_\_\_\_ Fax No.: \_\_\_\_\_

**Please indicate category of membership:**

Active Membership	_____	\$45	(\$30 per capita to LPI; \$15 to SMLPA)
Associate Membership*	_____	\$25	*Associate and Student members are local members only and are not eligible for LPI benefits
Student Membership*	_____	\$25	

**Please indicate which committee(s) you are interested in:**

Webpage	_____	Programs	_____
Bulletin Editor	_____	Day in Court	_____
Scholarship	_____	Holiday Party	_____
Publicity	_____		

Please return this form and your check payable to SMLPA by **May 31, 2022** to SMLPA Treasurer, Post Office Box 135, Santa Maria, CA 93456.

If you wish to pay by Stripe, send your Dues Statement via email to [treasurer.smlpa@yahoo.com](mailto:treasurer.smlpa@yahoo.com). A convenience fee of \$1.00 will be added to your payment.